



Health Care Reform Bulletin

November 14, 2011

Supreme Court Agrees to Review Affordable Care Act

This morning the Supreme Court announced that it will review the constitutionality of the Affordable Care Act's individual mandate, in an order posted on its website.

The court will hear over five hours of oral argument on the various challenges to the law that will be aggregated into a single decision. The Supreme Court could schedule the oral arguments as early as March; if the arguments are heard during the current session, the justices would release a decision by the end of the current session in June 2012.

Although the court is aggregating the appeals from a variety of challenges to the Affordable Care Act, there are only two main issues to be decided: the constitutionality of the individual mandate and its severability.

In other words, the Supreme Court will determine whether Congress has power under the Commerce Clause to order all citizens to obtain health insurance, and, if Congress lacks that power, whether the rest of the Affordable Care Act may stand if the individual mandate is struck down. Until the court reaches its decision, we will continue to bring you up-to-date information on the Affordable Care Act and how it impacts your business.

Visit <http://www.imacorp.com/hcr> to view previous Health Care Reform Bulletins.



New Labeling

Another set of proposed regulations released earlier this month will require plans and issuers to provide consumers with more user-friendly information about their health plans.

The regulation requires that consumers be given a Uniform Glossary of Terms and a standardized Summary of Benefits and Coverage. Although plans will be required to comply in March 2012, we expect to see additional clarification in the form of a Final Rule prior to that date, so look for more in-depth analysis of this new requirement in next month's bulletin.

Comment Period on Preventive Services Still Open

Don't forget that HHS is still accepting public comment on its proposed regulation on Women's Preventive Services Guidelines released at the beginning of August. These proposed rules require non-grandfathered plans to cover various preventive services, including contraceptives, with no cost-sharing. If you would like to submit a comment to HHS, you can find instructions here in our bulletin from earlier this month.